

McComb Recreation Department Application for Renting East McComb Activites Field 803 Avenue F McComb, MS 39648

DADIZ CLOCUDE, 10.00 DM

Rental Fee: \$300 per day (Includes: Grounds, Restrooms, & Concession Stand) Lights (\$30 per hour) Total:		Insurance requirement attached Security if Required (\$15 per hour) Total:	
Rental Date:	Time	am/pm until	am/pm
Description of Activity:			
Name of Individual Resp	ponsible:		
Address:	City	y:State:	Zip:
Home Phone:	Work Phone:	Cell Phone:	
Name of Organization:			

In order for the City of McComb to hold your reservation, payment and this form must be received at least 14 calendar days prior to the event. Failure to do so will result in loss of reservation. Rental fees must be paid in full 14 calendar days prior to the event.

Security may be required for the event.

CANCELLATIONS MUST BE MADE 14 DAYS PRIOR TO RENTAL DATE TO RECEIVE A FULL REFUND.

Refunds may be made on outdoor facilities if rained out. Cancellations within the two weeks prior to the event will result in a loss of deposit. All deposits or fees eligible for return will be mailed back to the renter from City Hall within 30 days following the event.

NO ALCOHOL OR SMOKING ALLOWED ON CITY PROPERTY!!!!!

The Lessee shall comply with all city, county, state and federal laws, and with regulations pertaining to the rental location. Violations by the Lessee or its agents or employees may result in cancellation of the Lease and/or discontinuation of use.

Clean-Up - Lessee must clean up any and all trash and remove any equipment at the conclusion of the event; otherwise, additional fees may be charged or deducted from deposits. Lessee is responsible for clean-up of the facility similar to pre-event condition.

Lessee agrees to:

- A. Bag and remove all trash to outside containers-Any trash which will create odors must be removed: THIS MEANS REMOVE ALL OF YOUR TRASH FROM THE PROPERTY.
- B. Any damages to the facility will be assessed at fair market value/replacement cost.

Lessee will be responsible for all individuals associated with their event. Should anyone <u>not</u> associated with your event attempt to join your event, the Lessee has the right to politely ask them to leave.

The Lessee may be required to obtain policies of insurance issued by companies authorized to do business in the State of Mississippi. The Insurance policies shall contain an endorsement providing Contractual Liability coverage to insure the liability assumed herein. Lessee must also provide Certificates of Insurance (Liability), naming the City of McComb as an additional insured in the following amounts:

Comprehensive General Liability – (Including spectator liability) providing the following limits:

- A. A Combined single limit policy form (Bodily Injury and Property Damage limits combined) of \$300,000.00 per occurrence, or...
- B. Bodily Injury Liability \$300,000.00 per occurrence
- C. Property Damage Liability \$100,000.00 per occurrence

The MRD staff shall be provided with a Certificate evidencing all such insurance as specified herein, and any other insurance which the City of McComb may require.

Renters will be responsible for notifying their participants/spectators not to block traffic on the streets in front of the park.

Vehicles may not park on the grass inside the park. Arrangements must be made at the time the rental agreement is executed to allow for the gates to be temporarily opened for any deliveries for an event.

Any structures, equipment, inflatables, etc. being brought onto the property must be approved by the MRD and any required and related insurance documents must also be presented before approval can be obtained.

I agree to abide by the policies and rules of the City of McComb. I understand that I am responsible for any damages to City property that may occur during my usage. I understand I should report any problems to the Department of Recreation. I intending to be legally bound, hereby, waive, and decline any and all rights and claims for damages I may have against the McComb Recreation Department, City of McComb, and sponsors, and their representatives, successors and assigns for any and all injuries suffered by myself.

Signed:		Date:				
Fees are subject to change without notification. Check with MRD for updated rates.						
Office Use Only:						
Deposit \$	Payment Method	Receipt_	Date:			
Payment \$	Payment Method	Receipt_	Date:			
Additional Fees \$ Explanation:	Payment Method	Receipt	Date:			

Notes: